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Survivor Income Needs Worksheet

- 1. In the event of your death, how much of your current monthly income would need to be replaced? \$\frac{\chi}{2}\frac{\chi}{0}\frac{\chi}{0}
- 3. How much of your current life insurance would be available to generate this monthly income? \$_/ @00, \$\sqrt{000}\$,
- 5. To generate a predictable and stable monthly income, what rate of return should be expected from the capital invested? _____%.
- 6. What tax rate should be applied to the income? _______%_
- 7. How much of the initial capital would you like to have left at the end of the monthly income payments? \$

Forms - Survivor Income Needs Worksheet 04/2006

Exhibit G



February 26, 2007

Mrs. Catherine L. Werner 4955 Aberfeldy Rd. Reno, NV 89519

RE: Recap of Our Meeting on February 15, 2007

Dear Catherine:

We have forwarded your request to change the beneficiary arrangement for your policy to our service center for processing. Upon completion, you will receive a confirmation of the changes.

During my discussion with you and your parents, you expressed your surprise to learn that you were not the only beneficiary listed on Cole's MetLife policy. We all learned of the multiple beneficiaries for the first time when I reported Cole's death to MetLife.

In my meeting with you and Cole back in September we discovered that his Metlife policy might require significant funding increases in order to maintain the coverage throughout Clarke's childhood years. For that reason, Cole agreed to apply for a new policy with me at the same time you were applying for your new policy. Cole's responses to the questions on the "Survivor Needs Analysis" form left me with the impression that the entire proceeds were available to provide for you in the event of his death.

In completing Cole's New York Life application, he listed you as the sole primary beneficiary. He signed a replacement form indicating his intent to replace his MetLife group life policy. The replacement would only occur if the new policy premiums were not excessive. Cole received a "select standard" rating making the policy fairly expensive so he elected not to take this new insurance at the time. It was my understanding that Cole was going to explore the funding options necessary to maintain his MetLife policy for the foreseeable future.

I hope this clarifies what I believed to be the case as it related to the beneficiary matter. Please call upon me anytime I may be of service.

Sincerely

Licensed Agent

Michael A. Norman, CLU

Registered Representative offering securities through NYLIFE Securities Inc. Member, NASD/SIPC

New York Life Insurance Company 50 W. Liberty St., Ste.500 Reno, NV 89501

T 775 325 2211 C 775 722 7788

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manorman@nyl.com

The Company You Keep*

Michael A. Norman, CLU

Financial Services Professional Ca. Ins. Lic. # 0752084

Exhibit H

RP314714

22190.74 (02/04)

This document must be signed by the applicant and the producer, and a copy left with the applicant.

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases the purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

accumulated dividends, of an existing policy, to pay all or part of any premium or payment due on the new policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interest. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy or contract and may reduce the amount paid upon the death of the insured.

policy involves the use of funds obtained by the withdrawal or your purchase of	lecision and ask that	replacement before you make you answer the following e reverse side of this form.
1. Are you considering discontinuing making premium payments, surrendering, forfe or otherwise terminating your existing policy or contract?	iting, assigning to the ir	nsurer, Dyes Ono
2. Are you considering using funds from your existing policies or contracts to pay pre- or contract?	miums due on the new	policy □ yes □ no
3. Is the policy for which you are applying, to be the result of a 1035 exchange?	All Minimum and All Committee of the Com	☐ yes ☐ no
If you answered "Yes" to any of the above questions, list each existing policy or contract each policy whether it will be replaced, used as a source of financing or replaced in conjust required, complete another form.)	you are contemplating unction with a 1035 ex	replacing. Also identify for change. (If additional space
Name of Insurance Company ANET LIFE	Policy or Contract #	# <u>1990000 </u>
Name of Insured Core a CAMPTSELL	Replaced Financed	□ 1035 Exchange
Name of Insurance Company	_ Policy or Contract #	
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Name of Insurance Company	Policy or Contract #	
Name of Insured	Replaced Financed	□ 1035 Exchange
Make sure you know the facts. Contact your existing company or its agent for informati request, an in-force illustration, policy summary or available disclosure documents mus retain all sales material used by the agent in the sales presentation. Be sure that you are	t be sent to you by the e	existing insurer. Ask for and
The existing policy(ies) or contract(s) is/are being considered for replacement because _	RATICA	RE
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By reason of this transaction, is replacement involved? Q yes on o (If yes, give det		Chean Chaffigar of the other Spiriters
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I certify that the responses herein are, to the best of my knowledge, accurate		
Applicant's Signature Applicant's Name (Printed)		Date
Car (Sept) and contract of the	MPRELL	291 /31 2201
Producer's Signature Producer's Name (Printed) MICHAEL A.	MORMAN	Date: 45/1/2016
I do not want this notice read aloud to me. (Applicant must initial only if the	nev do not want the not	ice read aloud.)

CUSTOMER COPY